LOUISIANA OPIOID SURVEILLANCE INITIATIVE

Bureau of Health Informatics



Emergency Department Indicators

The following Emergency Department indicators are defined in this section:

- 1. Drug-Related Visits
 - a. Number of Drug-Related Visits
- 2. Benzodiazepine-Related Visits
 - a. Number of Benzodiazepine-Related Visits
- 3. Opioid-Related Visits
 - a. Number of Opioid-Related Visits
- 4. Non-Heroin Opioid-Related Visits (including prescription opioids and synthetic opioids)
 - a. Number of Non-heroin Opioid-Related Visits
- 5. Heroin-Related Visits
 - a. Number of Heroin-Related Visits
- 6. Stimulant-Related Visits
 - a. Number of Stimulant-Related Visits



Indicator gro	up		Drug I	Relat	ed Vi	sits									
Indicator nan	nes		a. Nur	nber	of D	rug Rela	ited '	Visits	;						
Indicator def	inition	1	All unintentional, self-harm, assault, or undetermined acute drug poisoning (sometimes called drug overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Drugs are defined as any medicine or substance that have a physiological effect when ingested, injected, or absorbed into the body. This indicator includes legal and illicit drugs and excludes poisonings due to alcohol alone.										nters or fined as sted,		
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 960.0-979.9; E850.0-E858.9, E950.0-E950.5, E962.0, E980.0-E980.5; T36.0X1A-T50.94XD, excluding codes where the visit type (7 th) character is D or S and codes where the intent (5 th or 6 th) character is 5 or 6.										ter is D		
Denominator		All ED visits with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)													
Measures of	ency	Annual count of ED visits; Quarterly count of ED visits													
Data Resourc	Data Resource				Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI										
Period for ca definition		 Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December 													
Geography/D	emog	raphi	c Group	Var	iatio	ns									
Race Gender	М	White F	e Total	М	Blac F	ck Total	М	Oth F	er Total	All	Races All	Age Groups	Total		
Geography										Males	Females				
State	V	٦/	√	V	٦/	V	٦/	٦/	√	1	V	V	V		
Region	, √	√	v √	√	√	v √	√	, √	√	\ √	√	, √	√		
Parish	√	√	√	√	√	√	√	√	√	√	√	√ ·	√		
Limitations o	This indicator was specifically designed to capture acute drug poisonings, and therefore intentionally excludes secondary and sequelae–related ED visits that might better estimate the overall burden of drug poisonings on the hospital system. Searching all diagnosis codes for drug poisoning ICD-CM codes ensures the inclusion of all possible drug poisoning related ED visits, including those for which the drug poisoning was of secondary concern. Not all EDs report data to LHA, making the dataset not completely														
Limitations o resource	repres	enta	tive c		pula		_		et not com erefore, po		oased				



Indicator gi	oup		Benzo	diaze	oine-	Related	Visits	5					
Indicator na	mes		a. Nun	nber d	of Bei	nzodiaz	epine	-Rela	ted Visi	ts			
Indicator de	efiniti	ion	All unintentional, self-harm, assault, or undetermined acute benzodiazepine poisoning (sometimes called benzodiazepine overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Benzodiazepines include anticonvulsants (e.g. clonazepam, etc.), anxiolytics (e.g. alprazolam, etc.), and sedative hypnotics (e.g. estazolam, etc.). This indicator includes legal and illicit drugs.										artment tics (e.g.
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 969.4; E853.2; T42.4X1A,T42.4X2A,T42.4X3A,T42.4X4A										
Denominate	or						_		•		vant to the for annual		(the
Measures o Frequency	f		Annual count of ED visits; Quarterly count of ED visits										
Data Resou	rce		Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI										
Period for o			Annual : calendar year (1 January – 31 December) based on date of discharge Quarter : 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December										
	νυem ∣	_	phic Group Variations re Black Other All Races .										
Race Gender	М	Whit F	Total	М	F	Total	М	F	Total	All Males	All Females	Age Groups	Total
Geography State	√ ,	√	√ ,	√ ,	√ ,	√ ,	√	√,	√	√ ,	√ ,	√	√ ,
Region Parish	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √	√ √
Limitations indicator		V	This indicator was specifically designed to capture acute benzodiazepine poisonings, and therefore intentionally excludes secondary and sequelaerelated ED visits that might better estimate the overall burden of benzodiazepine poisonings on the hospital system. Searching all diagnosis codes for benzodiazepine poisoning ICD-CM codes ensures the inclusion of all possible benzodiazepine poisoning related ED visits, including those for which the benzodiazepine poisoning was of secondary concern.										
Limitations resource	of da	ita		entati	ve of	f the po			_		not compl efore, popu	-	sed rates



Indicator gr	oup		Opioid	d-Rela	ited \	/isits								
Indicator na	mes		a. Nun	nber	of Op	ioid-Re	lated	Visits						
Indicator de	efiniti	on	All unintentional, self-harm, assault, or undetermined acute opioid poisoning (sometimes called opioid overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Opioids include natural and semi-synthetic opioids (e.g. codeine, morphine, oxycodone, hydrocodone, etc.), heroin, methadone, and other synthetic opioids (e.g. fentanyl, carfentanil, etc.). This indicator includes legal and illicit drugs.										rs or natural odone,	
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 965.00-965.09; E850.0-E850.2; T40.0X1A-T40.4X5A, T40.601A-T40.694A, excluding codes where the visit type (7 th) character is D or S and codes where the intent (5 th or 6 th) character is 5 or 6.										t type is 5 or 6.	
Denominate	or			All ED visits with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)										
Measures of Frequency	f		Annual count of ED visits; Quarterly count of ED visits											
Data Resou	rce		Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI											
Period for o	ase		Annual : calendar year (1 January – 31 December) based on date of discharge Quarter : 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December											
Geography/	'Dem	ogra	phic Gr	oup \	/aria	tions								
Race		Whi	te		Blac	:k		Oth	er	All	Races	Age		
Gender	М	F	Total	М	F	Total	М	F	Total	All Males	All Females	Groups	Total	
Geography														
State	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	√	
Region	√	\checkmark	\checkmark	√	√	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	√	
Parish	√	√	√	√	√	√	√	√	√	√	√	√	√	
Limitations indicator			This indicator was specifically designed to capture acute opioid poisonings, and therefore intentionally excludes secondary and sequelae–related ED visits that might better estimate the overall burden of opioid poisonings on the hospital system. Searching all diagnosis codes for opioid poisoning ICD-CM codes ensures the inclusion of all possible opioid poisoning related ED visits, including those for which the opioid poisoning was of secondary concern. Not all EDs report data to LHA, making the dataset not completely											
Limitations resource	ta		entat	ive o	f the po			_		not compl efore, popu	•	sed rates		



Indicator gr	oup		Non-h	eroin	Opio	oid Visit	S						
Indicator na					•			ioid-F	Related	Emergen	ıcy Departn	nent Visits	
Indicator de	efinit	ion	All unintentional, self-harm, assault, or undetermined acute non-heroin opioid poisoning (sometimes called non-heroin opioid overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Non-heroin include natural and semi-synthetic opioids (e.g. codeine, morphine, oxycodone, hydrocodone, etc.), methadone, and other synthetic opioids (e.g. fentanyl, carfentanil, etc.). This indicator includes legal and illicit drugs.										odeine,
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 965.00, 965.02, 965.09; E850.0, E850.2; T40.0X1A-T40.0X4A, T40.2X1A-T40.4X4A, T40.601A-T40.694A, excluding codes where the visit type (7 th) character is D or S and codes where the intent (5 th or 6 th) character is 5 or 6.										
Denominate	or		All ED visits with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)										
Measures of Frequency	f		Annual count of ED visits; Quarterly count of ED visits										
Data Resou	rce		Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI										
Period for o	ase		Annual : calendar year (1 January – 31 December) based on date of discharge Quarter : 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December										
Geography/	'Dem	ogra	phic Gro	oup \	/aria	tions							
Race		Whi	te		Blac	ck		Oth	er		Races	Age	
Gender	М	F	Total	М	F	Total	М	F	Total	All Males	All Females	Groups	Total
Geography													
State	√,	√,	√,	√,	√	√	√ ,	√,	√	√ ,	√ ,	√ ,	√ ,
Region Parish	√ -/	√ √	√ -/	√ √	√ -/	√ -/	√ -/	√ -/	√ -/	√ -/	√ -/	√ -/	v √
Limitations indicator	of	V	This indicator was specifically designed to capture acute non-heroin opioid poisonings, and therefore intentionally excludes secondary and sequelae—related ED visits that might better estimate the overall burden of non-heroin opioid poisonings on the hospital system. Searching all diagnosis codes for non-heroin opioid poisoning ICD-CM codes ensures the inclusion of all possible non-heroin opioid poisoning related ED visits, including those for which the non-heroin opioid poisoning was of secondary concern.										oid e- eroin for possible
Limitations resource	of da	nta	Not al	l EDs entat	repo	rt data t f the po	o LH	۹, ma	king the	dataset	not compl efore, popu	-	sed rates



			T										
Indicator gr			Heroir										
Indicator na	mes		a. Nun	nber o	of He	roin-Rel	ated	Emer	gency D)epartme	ent Visits		
Indicator de	efiniti	on	All unintentional, self-harm, assault, or undetermined acute heroin opioid										
			poisoning (sometimes called heroin opioid overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent										
					_			_					
			an illic			queiae,	auve	rse ei	rects, or	unaerac	osing are e	xciuaea. n	ieroin is
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis										
			field:										
			965.01; E850.1; T40.1X1A, T40.1X2A, T40.1X3A, T40.1X4A										
Denominate	or		All ED visits with a discharge in the time period relevant to the measure (the										
			past three months for quarterly, the twelve months for annually)										
Measures of	f		Annual count of ED visits; Quarterly count of ED visits										
Frequency													
Data Resou	rce		Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI										
Period for c	256		Annual : calendar year (1 January – 31 December) based on date of discharge										
definition	usc		Quarter : 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1										
			October – 31 December										
Geography/	/Dem	ogra	phic Gro	oup V	/ariat	tions							
Race		Whi	1					Oth	er	All Races			
Gender	М	F	Total	М	F	Total	М	F	Total	All Males	All Females	Age Groups	Total
Geography													
State	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	\checkmark
Region	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	\checkmark
Parish	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	\checkmark
Limitations	of		This indicator was specifically designed to capture acute heroin poisonings, and										ngs, and
indicator						-			-	•	uelae–relat		
			might better estimate the overall burden of heroin poisonings on the hospital										
			system. Searching all diagnosis codes for heroin poisoning ICD-CM codes										
			ensures the inclusion of all possible heroin poisoning related ED visits, including those for which the heroin poisoning was of secondary concern.										
Limitations	of da	ta		Not all EDs report data to LHA, making the dataset not completely									
resource									_		efore, popu	-	sed rates
			canno	t be c	alcul	ated.							



Indicator gi	oup		Stimul	ant-R	elate	d Visits							
Indicator na	mes		a. Nur	nber (of Sti	mulant-	Relat	ed Vi	sits				
Indicator de	efiniti	ion	All unintentional, self-harm, assault, or undetermined acute stimulant poisoning (sometimes called stimulant overdose) emergency department (ED) visits regardless of discharge status. ED visits related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Stimulants include psychostimulants with abuse potential (including amphetamines and methamphetamine) and cocaine. This indicator includes legal and illicit drugs.										rs or de
Numerator			ED visits with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 970.81,969.70-969.79; E854.2, E854.3; T40.5X1A-T40.5X4A, T43.601A-T43.694A, excluding codes where the visit type (7th) character is D or S and codes where the intent (5th or 6th) character is 5 or 6.										
Denominate	or		All ED visits with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)										
Measures o Frequency	f		Annual count of ED visits; Quarterly count of ED visits										
Data Resou	rce		Louisiana Hospital Association Emergency Department Data; purchased by LDH/OPH/BHI										
Period for o	ase		Annual : calendar year (1 January – 31 December) based on date of discharge Quarter : 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December										
Geography	/Dem	ogra	phic Gr	oup \	/aria	tions							
Race Gender	М	Whit	te Total	Black		ck Total	М	Oth F	er Total	All Races All All		Age Groups	Total
Geography										Males	Females		
State	√	V	√	√	√	√	V	V	V	√	√	√	√
Region	√	√	√	√	√	√	√	√	√	√	√	√ ·	√
Parish	√	\checkmark	\checkmark	√	√	\checkmark	√	\checkmark	\checkmark	√	\checkmark	√	√
Limitations indicator	of		This indicator was specifically designed to capture acute stimulant poisonings, and therefore intentionally excludes secondary and sequelae–related ED visits that might better estimate the overall burden of stimulant poisonings on the hospital system. Searching all diagnosis codes for stimulant poisoning ICD-CM codes ensures the inclusion of all possible stimulant poisoning related ED visits, including those for which the stimulant poisoning was of secondary concern.										
Limitations resource	of da	ıta		entat	ive o	f the po			_		not compl efore, popu	•	sed rates